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From the Director's Desk

In a February 28, 2006, letter from Health and Human Services Secretary Mike Leavitt, members of the New York Congressional delegation were informed that Secretary Leavitt had asked me to take a lead role for coordinating the World Trade Center (WTC) health response programs in the U.S. Department of Health and Human Services. This role builds on NIOSH's involvement, since 2002, in funding health programs for screening, monitoring and treating WTC responders. In carrying out the Secretary's request, I have been working closely with federal, state and local agencies, private organizations, responders, clinics, and others to develop a roadmap for coordinating current and future programs.

I would like to share with you the goals I have set for accomplishing this task and to describe some of the activities where NIOSH and our partners are actively engaged. These goals fall into four general categories.

1. *Coordinate existing DHHS-funded programs including:*

- the WTC Medical Monitoring and Treatment Program administered by the Mt. Sinai School of Medicine and the New York and New Jersey Consortium, and funded by NIOSH. The program initially began as a medical screening program to establish health baselines for responders, and subsequently added a medical monitoring role. <http://www.wtcexams.org>
- the New York City Fire Department WTC Medical Monitoring and Treatment Program implemented by the FDNY Bureau of Health Services and funded by NIOSH. This program provides monitoring examinations and treatment for firefighters and emergency medical service technicians.
- the WTC Federal Responder Screening Program for current federal workers who responded to the attack in an official capacity. The program is administered by Federal Occupational Health, a unit of our Department. <https://wtcophep.rti.org/Default.aspx?tabid=1>
- the WTC Health Registry is administered by the the New York City Department of Health and Mental Hygiene and funded by CDC's Agency for Toxic Substances and Disease Registry (ATDSR). This telephone-based health and exposure interview is for responders and people living in or attending school in the area of the WTC, or working or present in the vicinity on September 11, 2001. <http://www.nyc.gov/html/doh/html/wtc/index.html>

We are also working with the following two groups:

- the NY Police Foundation COPE (Coping with Stress) is a collaborative effort between the NY Police Foundation, Columbia Medical Center, Department of Psychiatry and the New York Presbyterian Hospital. The comprehensive post-traumatic stress program provides free and confidential counseling for all NYPD employees and their families. <http://www.nycpolicefoundation.org>
- the Police Organization Providing Peer Assistance (POPPA) a non-profit organization which aids police officers and their families in coping more effectively with the multitude of stressors experienced during the course of the law enforcement profession. POPPA is dedicated to preventing and reducing marital problems, substance abuse, and suicide in addition to existing psychological disorders. <http://www.poppainc.com>

Later this summer, the directors from each of these programs will meet in New York City to share information about their individual programs.

2. *Identify unmet needs*

We are actively working to identify unmet needs of the WTC responders and those living or working near the WTC site on September 11, 2001. Currently, we are exploring the development of a case tracking system, a means of identifying individuals with health

problems or who have died and are not in the existing medical monitoring programs. There is no existing monitoring and treatment program for the residents of the lower Manhattan and Brooklyn areas, and we have identified this as an unmet need.

3. ***Ensure scientific reporting***

Just as we at NIOSH strive to present our research to our professional colleagues at scientific conferences and in scientific journals, we want to increase the number of clinicians and providers participating in the monitoring, screening and treatment programs who report their findings in the scientific literature.

Additionally, we are currently planning a WTC Science Symposium to showcase the DHHS-funded programs. Plans are underway to hold the symposium in Spring 2007 in New York City. Watch future issues of *eNews* for details on the symposium.

4. ***Detail lessons learned***

Unfortunately, no master list is available of those who responded to the WTC attack. Therefore, fully determining who responded to aid in the rescue, recovery, clean-up, and restoration efforts is virtually impossible at our current state of knowledge. Maintaining a master list of this type is one of the first lessons learned that became apparent as our coordination efforts started.

We are developing a WTC Health Programs Coordination Web site which will expand upon these goals and describe the programs, providing a central web-based resource for information. We will announce the Web site in a future issue of *eNews*.

Mold Intervention Strategies After Hurricanes, Floods Outlined

Strategies for limiting exposures to mold and preventing mold-related health effects in the aftermath of hurricanes and storms are outlined by scientists and engineers from NIOSH and partner agencies in the U.S. Centers for Disease Control and Prevention (CDC) in an article published in the June 9, 2006, issue of CDC's *Morbidity and Mortality Weekly Report*. The report notes that, for most people, undisturbed mold is not a substantial health hazard. It is a greater hazard for persons with conditions such as impaired host defenses or mold allergies. To prevent exposure that could result in adverse health effects from disturbed mold, persons should 1) avoid areas where mold contamination is obvious, 2) use environmental controls, 3) use personal protective equipment, and 4) keep hands, skin, and clothing clean and free from mold-contaminated dust, the article recommends. The article is available on-line at <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5508a1.htm>.



NIOSH Issues Review, Recommendations on Refractory Ceramic Fibers

A comprehensive scientific document on occupational exposures to refractory ceramic fibers is now available from NIOSH. The document provides a thorough critical review of scientific information concerning occupational exposures to refractory ceramic fibers, recommends an exposure limit to address potential work-related health effects, and outlines a recommended strategy to minimize exposures in the workplace. The document, *Criteria for a Recommended Standard: Occupational Exposure to Refractory Ceramic Fibers*, DHHS (NIOSH) Publication No. 2006-123, incorporates an intensive NIOSH evaluation of the published scientific literature, as reflected by more than 230 cited references. It also incorporates comments by independent scientific peer-reviewers and diverse stakeholder representatives. NIOSH estimates that approximately 31,500 workers are potentially exposed to refractory ceramic fibers during manufacturing, distribution, handling, installation, and removal of these materials. Refractory ceramic fibers are synthetic fibers produced by the melting and blowing or spinning of calcined kaolin clay or a combination of alumina, silicon dioxide, or other oxides. They are used in commercial applications requiring lightweight insulation that is capable of withstanding high temperatures, such as furnace and kiln insulation. The document is available at <http://www.cdc.gov/niosh/docs/2006-123>.



NIOSH Topic Pages Named Best-of-the Web

The NIOSH Topic Pages on [interstitial lung disease](http://www.thoracic.org/sections/clinical-information/best-of-the-web/pages/interstitial-lung-disease.html) have received a rating of “excellent” by the American Thoracic Society. The five-star review on the society’s web site at <http://www.thoracic.org/sections/clinical-information/best-of-the-web/pages/interstitial-lung-disease.html> rated sites according to their authority, timeliness, accuracy, utility and navigation. According to the review conducted by Dr. Charlie Strange of the Medical University of South Carolina, the NIOSH Web sites “contain a wealth of information concerning occupational lung diseases.” The review singled out the *NIOSH WoRLD Surveillance Report*, citing the usefulness of its county-level occupational mortality data. The *WoRLD Surveillance Report* can be accessed at <http://www2a.cdc.gov/drds/WorldReportData>.



World-renowned Laboratory adopts NIOSH Methods

NIOSH technical methods for lead sampling and analysis were incorporated recently into standard procedures used by the U.S. Department of Energy’s Brookhaven National Laboratory. A world-renowned laboratory overseen and funded by the Office of Science of the U.S. Department of Energy, Brookhaven conducts research in the physical, biomedical, and environmental sciences, as well as in energy technologies and national security. The Industrial Hygiene Group in Brookhaven’s Safety and Health Services Division incorporated the NIOSH Method 9110 on Lead in Surface Wipes into its surface wipe sampling procedure. Also referenced in one of the laboratory’s standard operating procedures is NIOSH Method 7702, Lead by Field Portable XRF for Detection of LBP (Lead based paint) by the Niton XL300 XRF Meter and Lead in Wipe Samples by Niton XL700 X-Ray Fluorescence Meter.

NIOSH National Personal Protective Technology Laboratory Update

A June 29 notice alerts users that a respirator represented by the manufacturer as NIOSH-approved has not in fact been approved by NIOSH. A June 30 notice alerts users that NIOSH has voided approvals for two other devices. View additional information at <http://www.cdc.gov/niosh/npptl/usernotices/>.

NPPTL

In Memoriam

Jack Hardesty, who retired from Federal Service in 1981 after a distinguished career as a public information officer for NIOSH and other agencies of the U.S. Public Health Service, passed away May 23, 2006, at his home in Ashland, OR. A pioneering communicator in the field of occupational safety and health, he joined the federal government in 1955 and served as the NIOSH press officer in the late 1970s. His wife Alice, who survives him, conducted internationally recognized research in what is now the NIOSH Division of Applied Research and Technology on the subject of work-related hearing-loss prevention.

r2p Corner

Two NIOSH designed field methods for detecting methamphetamine now commercially available.

NIOSH scientists recently partnered with SKC Inc., a prominent manufacturer of sampling technologies, to commercialize two low-cost, NIOSH-designed field methods to help first responders, public health officials, and remediation workers quickly detect the presence of methamphetamine on various environmental surfaces. Now, a single sampling technique can be used to detect trace levels of the illicit drug on surfaces, or used to evaluate decontamination efforts or clearance.



The kits are available from SKC Inc. at <http://www.meth-wipe.com>. Mention of this company's name does not constitute a NIOSH commercial endorsement.



MethAlert



MethCheck

For more information on NIOSH research related to field methods for methamphetamine detection, please contact John Snawder at JSnawder@cdc.gov or Eric Esswein at EEsswein@cdc.gov.

NORA

NORA Symposium highlights now available on the Web

Relive your favorite moments from the NORA Symposium! An updated version of the NORA Symposium Web page, <http://www.cdc.gov/niosh/nora/symp06/>, is now available. There you can download the program book with nearly 200 abstracts of the latest in occupational safety and health research. Read about innovative award winning projects and view the world premier of a poem about workplace safety and health. The symposium participants applauded the concept, emotion, content, and performance of the poem created by health educator and poet Stacy Smallwood, which highlighted the human impact of workplace injury and illness. Also added to the NORA site are summaries from the sector and cross sector workshops, and copies of the NORA Compendium and the NORA Team Document.



News From Our Partners

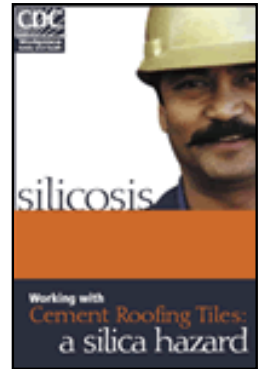
OSHA debuts electronic Spanish-language Newsletter

The Occupational Safety and Health Administration (OSHA) announces the availability of a new electronic, Spanish-language safety and health newsletter, *Capsulas de Salud y Seguridad*. The newsletter, produced by OSHA's New York Region, will educate employers and employees in New York, New Jersey, Puerto Rico, and the U.S. Virgin Islands on ways to reduce workplace hazards and improve safety and health in their workplaces, with a particular focus on topics affecting Hispanic workers. You may obtain a copy or receive future editions by emailing prvi-osh-news@dol.gov or by visiting the OSHA Spanish-language Web page, <http://www.osha.gov/as/opa/spanish/index.html>.

Communication Products

***Silicosis-Working with Cement Roofing Tiles: A Silica Hazard* DHHS (NIOSH) Pub. No. 2006-110**

A new NIOSH educational brochure, <http://www.cdc.gov/niosh/docs/2006-110>, describes measures that can be taken to reduce roofers' exposure to silica dust, including steps for implementing a respirator program. NIOSH has measured respirable silica levels up to four times the recommended exposure limit around roofers cutting cement products, such as when roofing tiles are cut during the installation process.



Health Hazard Evaluations

- **Evaluation of exposure to solvents at an aircraft fuel cell manufacturing facility.** NIOSH investigators responded to a request by employees to assess whether employee health effects of dermatitis and acute neurological symptoms were related to exposures in the work environment. They found that airborne exposures to methyl ethyl ketone (MEK), toluene, and acetone were well below current occupational exposure limits, but documented significant potential for dermal exposure among some workers. Employees with higher MEK exposure had significantly more symptoms of fatigue, lack of coordination, and muscle weakness. Investigators recommended modifying work practices and personal protective equipment and improved worker training to reduce dermal solvent exposures. The full report is available at <http://www.cdc.gov/niosh/hhe/reports/pdfs/2000-0374-2998.pdf>
- **Evaluation of gastrointestinal illness at a manufacturing facility.** NIOSH investigators responded to a request from the union representing employees at a furnace manufacturing facility to assess whether gastrointestinal illnesses among workers in a metal stamping and washing area were related to workplace exposures. They found that bulk water samples from the washer operation contained large numbers of fecal bacteria, and that many employees working on or near the contaminated machine had active diarrhea. Management determined that a pipe had connected the machine's water reservoir to a sewage line. Once it received NIOSH's initial report, management cut and capped the pipe. NIOSH investigators recommended additional precautionary measures, including hiring an experienced cleaning contractor to disinfect the contaminated machine, improving personal protective equipment use until the machine was properly cleaned, and prohibiting eating, drinking, chewing gum, or smoking in the plant production areas. The full report is available at <http://www.cdc.gov/niosh/hhe/reports/pdfs/2005-0024-3000.pdf>

Upcoming Events

13th International Respiratory Protection of Healthcare Workers and Emergency Responders

The *13th International Respiratory Protection of Healthcare Workers and Emergency Responders Conference* will be held August 27-September 1, 2006 in Toronto, Ontario, Canada. Topics for papers include respiratory protection for healthcare workers, emergency responders, and those in developing countries, updates on standards and regulations, emerging hazards and technologies, and fundamentals of respiratory protection. More information on the conference can be found at <http://www.isrp.com.au/>.

Noise-Induced Hearing Loss in Children at Work and Play

NIOSH and partners will cosponsor *Noise-Induced Hearing Loss (NIHL) in Children at Work and Play* October 19-20, 2006 in Cincinnati, Ohio. The conference will focus on the issue of NIHL in children who sometimes begin working as early as age 10-12 years, often in noisy occupational environments, such as construction, agriculture, entertainment and landscaping. Other cosponsors for the conference include the National Hearing Conservation Association, Oregon Health and Science University, the Marion Downs Hearing Center, the University of Northern Colorado, and the National Institute on Deafness and Other Communication Disorders. More information on the conference is available at http://www.hearingconservation.org/conf_childrenconf.html.

International Conference on Nanotechnology Occupational and Environmental Health and Safety: Research to Practice

NIOSH and the University of Cincinnati will cosponsor the *International Conference on Nanotechnology Occupational and Environmental Health and Safety: Research to Practice* December 3-8, 2006 in Cincinnati, Ohio. The conference is centered on the impact of nanotechnology on occupational and environmental health and safety. For more information, visit the conference Web site at <http://www.uc.edu/noehs>. The conference follows other successful international forums cosponsored by NIOSH in Buxton, U. K., in 2004, Minneapolis in 2006, and Miami earlier in 2006.

Word of the Month

Interstitial lung disease is a general term used to describe a group of chronic lung diseases which affect the deepest parts of the lungs, where oxygen is transferred into the blood stream. Many of these diseases are caused by the inhalation of dusts or fumes, such as asbestosis, coal worker's pneumoconiosis, silicosis, and bronchiolitis obliterans.

[NIOSH eNews on the Web: www.cdc.gov/niosh/enews/](http://www.cdc.gov/niosh/enews/)

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